

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

J. D. DUNSHEE, M.D., Director

Weekly Bulletin



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GUY P. JONES
EDITOR

Milk

By HERBERT J. SAMUELS, D.D.S., Oakland

Milk is a unique food substance. It is said to be a more complete food than any other food material. As it contains the four classes of nutrients—protein, fat, carbohydrates and mineral matter—it is peculiarly adapted to be a food for man.

Some authorities state that milk is responsible for approximately 20 per cent of the food costs of the people of the United States. It is the primary fluid product of the dairy industry, being the source of butter, cheese, powdered (or "dry") milk, evaporated (or "condensed") milk and ice cream. Involving, as it does, "many human and seasonal uncertainties and interrelations with other grand divisions of agriculture," the dairy industry has probably caused the Agricultural Adjustment Administration more concern than any other activity of the American farmer.

According to the report of C. C. Davis, administrator of A.A.A., of the nearly 4,000,000 producers of milk in the United States the Pacific slope has a very large share, though the heaviest production is in the North Central and North Eastern States. From 1929 to 1932 dairy products brought to farmers more than one billion, eight hundred million dollars (\$1,800,000,000), which amount is more than the gross value of the product of any other branch of American agriculture. In 1932 milk and its products constituted approximately one fourth of the total farm

income. Because fluid milk is highly perishable it must be produced daily and (in most localities) meet inspection by public health officials and must be available all year, even when production costs are high and commands a higher relative price than butter and other milk products, which may be stored.

The production of milk and its products has been designated by the Agriculture Adjustment Administration as a basic farming industry. The production, transportation, storage, distribution and sale of milk and the manufacture of milk products is "a business affecting the public health and public interest," and is so acknowledged in the milk control law passed by the legislature of New York in April, 1933. The prevention of milk borne disease is one of the functions of every public health official.

As fluid milk has been proven to be a peculiarly potent medium for transmitting disease from animal to man and from man to man, the business of its production and distribution logically should be regulated by those responsible for the public health.

Milk may be the source of epidemic disease in any community, unless produced under strict sanitary conditions, processed according to accepted methods and distributed so that the chain of protective links is not broken. While it is true that the dairy industry, by practicing sanitary methods of production and

distribution, as prescribed by law, has reduced milk borne outbreaks of epidemic disease, there are yet communities in the United States that do not compel pasteurization of all milk before it may be sold or physical examination of those who dispense milk from patent or open containers directly to consumers. Other communities are said to be lax in strict enforcement of reasonable laws at present providing for marketing milk and other food products under sanitary conditions.

During 1933, in the United States, there were 41 epidemics traced to contaminated milk, with a total of 1331 cases of illness. There were 306 cases of typhoid and paratyphoid reported in 26 outbreaks, and 92 cases of septic sore throat in 8 outbreaks, and 79 cases of scarlet fever in 2 outbreaks, together with other cases. It is striking to note that "not one of the 1933 milk borne outbreaks in the United States was attributed to a pasteurized supply." While this suggests the importance of certain well-known methods of disease prevention in the handling of milk, there is much to be done in the regulation of retail distribution and in the dispensing of milk in public eating places. Local sanitary inspectors are fully aware of the questionable conditions that are said to exist, and it is possible that more legislation may be needed to further protect the public.

The cost of milk production is variable and is governed by feed prices, pasture (which depends on weather conditions), freight charges and storage stocks—such as butter, cheese and evaporated milk. The marketing of fluid milk is a complex problem—little understood by the individual consumer. Whether the agreements already made and the agreements expected to be made, by producers, distributors, processors and retail dispensers will materially affect the cost to the consumer of this basic food material is still a matter of serious concern. It is believed that satisfactory production and distribution methods and regulations will place this most important farm product in the homes of all—at a price consistent with the cost of production and distribution and favorable to its safe, general use as a necessary and staple food.

A STUDY OF UNDERNOURISHED SCHOOL CHILDREN

Doctors Gronhovd and Little of Santa Paula have made an interesting study of undernourished school children in that city. Following is a report of their work:

"Measurements taken in Santa Paula during the winter of 1934 showed a large number of the school children to be underweight according to the table of averages in general use.

While misleading in individual cases, such comparisons have some statistical value and may be taken as a whole to mean a malnourished condition among children below the standard. In an effort to uncover some of the causative factors a small study was made this spring among the Mexican school children. Due to the economic crisis the dietary of many has been deficient in quantity and most certainly in variety (though to some extent supplemented by milk and soup at school). Generally speaking, the diet has consisted of white flour and beans with but little milk and vegetables.

Physical examinations of 100 of the undernourished revealed certain interesting factors which are presented as follows:

90%	Hemoglobin (Tallquist) -----	4%
85%	-----	9%
80%	-----	61%
75%	-----	16%
70%	-----	10%
	Pronated feet-----	10%
	Fatigue posture-----	62%
	Enlarged tonsils-----	37%
	Palpable ant. cerv. glands-----	25%
	Dental caries-----	42%

Mantoux test (1/20 Mg. O. T.) 5% positive.

Of special interest is the last figure in the light of its comparison with the same test done on 400 Mexican children not undernourished. These showed only 29 per cent positive. It would seem possible that there may be some relation between the undernutrition of this group and their tuberculous infection. Owing to the lack of funds further study by means of the X-ray could not be undertaken."

YUBA COUNTY HAS NEW HEALTH OFFICER

Dr. J. H. Barr, who has been health officer of Yuba County for many years, has been succeeded in office by Dr. Stanley R. Parkinson of Marysville.

Dr. W. S. Davis has retired as health officer of Corona, which position he has held for many years. He is succeeded by Dr. Denver D. Roos.

LESSON XII

TUBERCULOSIS

1. Are tuberculosis sanatoria under regulation?

Yes. The law requires the State Board of Public Health to make rules and regulations for the administration of tuberculosis sanatoria.

2. Are they inspected?

Yes. Inspections of such places are made regularly.

3. What special provisions are made for tuberculosis care in California?

The State provides a subsidy of \$3 per week per patient to counties which maintain the required standards in their tuberculosis sanatoria.

4. How is this subsidy provided?

Through the provision and maintenance of standards, as well as the certification of patients made by the Bureau of Tuberculosis.

5. Must private, as well as public, tuberculosis sanatoria be supervised?

Yes. The law requires that both public and private tuberculosis sanatoria conform to the board's regulations and all such places are inspected regularly by the staff members of the bureau.

6. Are clinics conducted?

Yes. Special clinics for special groups are conducted for the purpose of discovering cases of tuberculosis. These have been conducted chiefly among high school freshmen in the public schools, teachers and students in State colleges, and among certain occupational groups.

7. Are community surveys made?

Yes. Upon request, surveys of communities for the purpose of determining the extent of tuberculosis are made.

8. Is educational work carried on?

Yes. Literature pertaining to the control of tuberculosis is distributed, exhibits are provided, and an informational service is given for the benefit of the general public.

(Lesson XIII will appear next week)

BIRTHS SHOW SLIGHT INCREASE

During the first two months of 1934, as compared with the first two months of 1933, births in California showed an increase of 86. There may be significance in the fact that there were 116 more white births and 9 more negro births during this period and that decreases occurred among births of other races. This is the first time that there has been an increase in the number of births occurring during the first two months of the year since 1930, when there was an increase of 176 over the corresponding period of 1929.

The following table gives detailed information upon the subject:

	1934	1933
Total births (2 mo.) -----	12,279	12,193
Male -----	6,251	6,304
Female -----	6,028	5,889
White -----	9,778	9,662
Negro -----	188	179
Indian -----	57	67
Chinese -----	98	101
Japanese -----	275	289
Mexican -----	1,829	1,836
Other -----	54	59

AUTOMOBILES MORE DEADLY THAN INFANTILE PARALYSIS

Infantile paralysis causes relatively few deaths in California. During the past five years automobiles have caused six times more deaths among children under fifteen years of age than has infantile paralysis, and during the past four years, according to the Division of Motor Vehicles, 15,268 California children have been injured in automobile accidents. During the same period of time there were but 2556 cases of infantile paralysis reported in California, many of which resulted in complete recovery, without disabling handicaps.

The following table shows that diphtheria causes four times as many deaths as infantile paralysis and influenza is five times more fatal.

Tuberculosis, during the years 1929-1933, caused twelve times more deaths than infantile paralysis. Deaths from this cause are regarded passively by a large part of the general public although tuberculosis is more easily prevented than poliomyelitis. Automobile deaths may also be regarded as preventable, but they do not begin to cause the terror that infantile paralysis inspires. If a small portion of the anxiety that is directed toward infantile paralysis were devoted to the prevention of diseases like diphtheria and tuberculosis for which definite methods of control are established, many children's lives might be saved.

Deaths, Under 15 Years, for Certain Causes, California,
1929-1933

	1929	1930	1931	1932	1933	Total
Epidemic poliomyelitis (infantile paralysis) -----	35	93*	36	20	9	193
Typhoid fever -----	23	17	28	24	18	110
Scarlet fever -----	62	54	49	34	56	255
Diphtheria -----	165	168	160	179	95	767
Influenza -----	238	136	172	178	185	909
Automobile accidents -----	267	231	272	184	199	1153
Tuberculosis -----	518	552	482	434	397	2383

* In 1930 there occurred the most extensive outbreak of infantile paralysis ever reported in California—1905 cases.

DEATH COMES TO INSPECTOR VEATCH

Frank G. Veatch, who had been a sanitary inspector with the California State Department of Public Health since 1921, died July 9, 1934. Mr. Veatch was a qualified inspector who accomplished a large amount of work without friction. He possessed tact, ingenuity and courtesy, attributes that are essential in dealing with problems related to sanitation. His many friends throughout the State will regret to learn of his passing, which came after an illness of six months.

MORBIDITY***Chickenpox**

88 cases of chickenpox have been reported, as follows: Oakland 6, Angels Camp 1, Fresno County 4, Fresno 1, Reedley 1, Los Angeles County 8, Alhambra 1, Burbank 2, Glendale 4, Long Beach 1, Los Angeles 16, Pasadena 2, Redondo 1, San Gabriel 1, Whittier 3, South Gate 1, Orange County 2, Santa Ana 2, Sacramento County 1, Colton 1, Redlands 1, San Diego County 1, Chula Vista 4, San Diego 2, San Francisco 12, San Luis Obispo County 3, Paso Robles 1, San Luis Obispo 2, Redwood City 1, Shasta County 2.

Diphtheria

32 cases of diphtheria have been reported, as follows: Los Angeles County 2, Compton 1, Glendale 1, Inglewood 1, Los Angeles 13, San Fernando 1, San Gabriel 1, Gardena 1, Sacramento County 1, San Bernardino County 2, Colton 2, San Diego 1, San Francisco 1, San Jose 2, Dinuba 1, Tulare 1.

German Measles

37 cases of German measles have been reported, as follows: Contra Costa County 1, Reedley 1, Los Angeles County 4, Culver City 1, Inglewood 1, Long Beach 2, Los Angeles 6, Monrovia 1, Pasadena 1, South Gate 1, Orange County 4, Anaheim 1, Riverside County 2, Colton 1, San Francisco 1, San Joaquin County 1, Shasta County 8.

Influenza

14 cases of influenza have been reported, as follows: Kern County 4, Lake County 1, Los Angeles County 2, Los Angeles 5, San Francisco 2.

Malaria

One case of malaria from Los Angeles has been reported.

Measles

231 cases of measles have been reported, as follows: Albany 5, Berkeley 5, Oakland 12, Contra Costa County 2, Richmond 7, El Dorado County 1, Fresno County 1, Fresno 3, Reedley 1, Eureka 1, Inyo County 1, Kern County 1, Lemoore 1, Lake County 3, Los Angeles County 3, Culver City 1, El Monte 1, Glendale 2, Glendora 1, Los Angeles 8, Pasadena 7, Santa Monica 1, South Gate 1, San Rafael 3, Sausalito 1, Orange County 1, Anaheim 1, La Habra 6, Placer County 2, Auburn 1, Plumas County 1, Riverside 1, Sacramento County 1, Sacramento 3, San Bernardino County 2, Colton 1, Redlands 1, San Diego 2, San Francisco 55, San Joaquin County 3, San Luis Obispo County 1, San Mateo County 1, Redwood City 1, San Mateo 1, Santa Barbara County 4, Santa Barbara 11, Santa Maria 1, Santa Clara County 3, Palo Alto 5, San Jose 22, Watsonville 1, Shasta County 1, Solano County 1, Sonoma County 3, Stanislaus County 3, Modesto 1, Ventura County 3, Fillmore 11, Yolo County 1, Woodland 2.

Mumps

74 cases of mumps have been reported, as follows: Alameda County 2, Oakland 9, Piedmont 2, San Leandro 7, Fresno County 1, Fresno 1, Lemoore 1, Los Angeles County 2, Alhambra 1, Culver City 1, Glendale 1, Los Angeles 8, Pasadena 1, Redondo 1, Santa Monica 1, Sausalito 1, Santa Ana 1, Tustin 1, Plumas County 1, Sacramento County 1, Sacramento 2, Coronado 1, San Diego 2, San Francisco 18, South San Francisco 1, Watsonville 1, Shasta County 1, Solano County 1, Sonoma County 1, Yuba City 1, Exeter 1.

Pneumonia (Lobar)

22 cases of lobar pneumonia have been reported, as follows: Colusa 2, Los Angeles County 1, Alhambra 1, Compton 1, Long Beach 1, Los Angeles 1, South Gate 1, Monterey Park 1, Newport Beach 1, Sacramento County 1, Sacramento 1, San Bernardino County 1, Chula Vista 1, San Francisco 1, San Joaquin County 3, Stockton 3, Santa Barbara 1.

Scarlet Fever

83 cases of scarlet fever have been reported, as follows: Contra Costa County 4, Martinez 1, Fresno County 1, Imperial County 1, Lake County 1, Los Angeles County 13, Alhambra 1, El Monte 1, Inglewood 1, Los Angeles 22, Montebello 1, Pasadena 1, South Gate 1, Grass Valley 1, Orange County 1, Fullerton 1, Sacramento County 1, Chula Vista 2, National City 1, San Diego 5, San Francisco 6, San Joaquin County 3, Santa Barbara 4, Modesto 1, Yuba City 1, Tulare County 2, Dinuba 1, Ventura County 1, Fillmore 3.

Smallpox

2 cases of smallpox have been reported, as follows: Fresno 1, California 1.**

Typhoid Fever

11 cases of typhoid fever have been reported, as follows: Brawley 2, Los Angeles 1, Sacramento County 1, Chino 1, Needles 1, San Diego 1, San Joaquin County 1, Santa Barbara 1, Tulare 1, California 1.**

Whooping Cough

154 cases of whooping cough have been reported, as follows: Alameda 2, Berkeley 6, Oakland 2, San Leandro 1, Fresno County 1, Fresno 1, Kern County 3, Lemoore 1, Los Angeles County 19, Compton 2, Glendale 2, Huntington Park 1, Los Angeles 34, Monrovia 1, Pasadena 4, San Fernando 1, Santa

Monica 3, Hawthorne 1, South Gate 4, Sausalito 1, Soledad 1, Orange County 3, Anaheim 1, La Habra 2, Placentia 5, Auburn 1, Riverside County 2, Corona 1, Sacramento 8, San Bernardino County 1, Colton 1, San Diego 2, San Francisco 7, San Joaquin County 5, Stockton 1, Tracy 1, San Luis Obispo 1, San Mateo County 1, Santa Barbara County 2, Santa Barbara 6, Santa Maria 2, San Jose 1, Shasta County 4, Tulare County 1, Ventura County 3, Marysville 1.

Meningitis (Epidemic)

One case of epidemic meningitis from Los Angeles has been reported.

Dysentery (Amoebic)

4 cases of amoebic dysentery have been reported, as follows: Brawley 1, Pomona 1, Marin County 1, San Francisco 1.

Dysentery (Bacillary)

2 cases of bacillary dysentery have been reported, as follows: Los Angeles County 1, Bell 1.

Pellagra

One case of pellagra from San Joaquin County has been reported.

Poliomyelitis

277 cases of poliomyelitis have been reported, as follows: Alameda County 1, Alameda 2, Albany 2, Berkeley 8, Oakland 10, Richmond 2, Fresno County 7, Fresno 15, Reedley 3, Kern County 2, Los Angeles County 32, Alhambra 2, Beverly Hills 1, Compton 1, El Monte 1, Glendale 3, Inglewood 2, Long Beach 1, Los Angeles 98, Monrovia 2, Montebello 3, Pasadena 3, Pomona 2, San Fernando 1, Santa Monica 5, South Pasadena 1, Monterey Park 1, Maywood 1, Bell 1, Monterey County 2, Monterey 2, Santa Ana 1, Sacramento 3, San Bernardino County 1, San Diego County 1, Coronado 2, San Diego 3, San Francisco 15, San Joaquin County 1, San Mateo County 2, Daly City 2, San Mateo 1, Belmont 1, Santa Barbara 1, Santa Clara County 3, Palo Alto 1, San Jose 1, Santa Clara 1, Willow Glen 1, Solano County 2, Modesto 1, Tulare County 4, Exeter 1, Tulare 3, Tuolumne County 1, Sonora 1, Yolo County 1, Yuba County 1, Marysville 1, California 3.**

Tetanus

2 cases of tetanus have been reported, as follows: Oakland 1, Ceres 1.

Trachoma

3 cases of trachoma from National City have been reported.

Dengue

One case of dengue from San Francisco has been reported.

Trichinosis

One case of trichinosis from Petaluma has been reported.

Food Poisoning

17 cases of food poisoning from Lake County have been reported.

Actinomycosis

One case of actinomycosis from San Rafael has been reported.

Coccidioidal Granuloma

One case of coccidioidal granuloma from San Diego has been reported.

Septic Sore Throat (Epidemic)

3 cases of epidemic septic sore throat have been reported, as follows: San Diego 1, San Mateo 1, South San Francisco 1.

Rabies in Animals

25 cases of rabies in animals have been reported, as follows: Los Angeles County 11, Alhambra 1, Glendale 1, Los Angeles 3, Pasadena 1, Santa Monica 1, Whittier 1, Lynwood 2, Gardena 1, Sacramento County 2, Stanislaus County 1.

* Complete reports for diseases given for week ending July 7, 1934.

** Cases charged to "California" represent patients ill before entering the State or those who contracted their illness traveling about the State throughout the incubation period of the disease. These cases are not chargeable to any one locality.

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